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**CONFIRMATION NO. 4027**

SERIAL NUMBER 10/686,533	FILING DATE 10/16/2003  RULE	CLASS 273	GROUP ART UNIT 3712	ATTORNEY DOCKET NO. 14296-19US JA/Id
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *BHL*

This appln claims benefit of 60/418,378 10/16/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *none*IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED

\*\* SMALL ENTITY \*\*

\*\* 01/21/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
met <i>Benjamin</i> <i>Y. G.</i> <i>BHL</i>	CANADA	3	21	1
Verified and Acknowledged <i>Benjamin</i> <i>Y. G.</i> <i>BHL</i>	Examiner's Signature	Initials		

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## TITLE

Method of offering insurance in a gambling game

<p>FILING FEE RECEIVED 459</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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